



ASC Utilization Report  
State Form 49933 (R3/6-05)  
Indiana State Department of Health  
Acute Care

Status: Finalized

I. Center Identification

Organization Name: INDIANAPOLIS ENDOSCOPY CENTER, LLP

Street Address: 8315 E. 56th Street, Suite 100

City: Indianapolis

County: Marion

Administrator Name: Tamela Richardson

Administrator Email: trichardson2@ecommunity.com

ASC Web Address: www.communityendo.com

Fiscal Year: 2018

Accredited:  Yes  No

Name of Accrediting Body: AAAHC

Deemed Status:  Yes  No

Corporate Tax Status:  For Profit  Non Profit

II. Identification of Surgical Resources

Number of operating rooms	0
Number of procedure rooms	4

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	12975	13330
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	3826	
45385	3630	
45380	3478	
G0105	1144	
G0121	1006	
45378	600	
44361	342	

43235	302
45381	265
43248	247

#### IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
--	---